Late Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

| NAME OF FILER LOS ANGELES COUNTY FIREFIGHTERS LOCAL 1014 LEGISLATIVE FUND COMMITTEE AREA CODE/PHONE NUMBER 1.D. NUMBER (if applicable) 742008 | | Date of This Filing _ | 06/02/2010 | Date Stamp | CALIFORNIA 497 | | |
|---|---|---------------------------------------|---------------------------------|-------------------------------------|-----------------------------------|-----------------------|--------------------|
| | | 2) | Report No | 16 | | For Official Use Only | |
| STREET ADDRESS | | | Amendme to Report No | | Page 1 of 2 | | |
| CITY EL MONTE | STATE CA | ZIP CODE 91731 | (explain below) No. of Pages 2 | | | | |
| Late Contribution | (s) Received | | | | | | |
| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | | | CONTRIBUTOR CODE * | I ENTER OCCUPATION AND EMPLOTER I | | AMOUNT RECEIVED |
| | | | | ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC ☐ IND | | | |
| | | | | COM OTH PTY SCC | | | |
| | | | | ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | | |
| | | | | | | | |
| *Contributor Codes IND - Individual COM - Recipient Committe OTH - Other | PTY - Politice (other than PTY or SCC) SCC - Sma | cal Party Il Contributor Committee | | | | | |

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Late Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

| NAME OF FILER LOS ANGELES COUNTY FIREFIGHTER | RS LOCAL 1014 LEGISLATIVE FUND COMMITTEE | Date of This Filing06/02/2010 | Date Stamp | CALIFORNIA FORM 497 | |
|--|--|---------------------------------|-------------|-----------------------|--|
| AREA CODE/PHONE NUMBER | I.D. NUMBER (if applicable) 742008 | Report No16 | | For Official Use Only | |
| STREET ADDRESS | | Amendment to Report No. | Page 2 of 2 | | |
| CITY EL MONTE | STATE ZIP CODE CA 91731 | (explain below) No. of Pages 2 | | | |

Late Contribution(s) Made

| DATE MADE | FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION | AMOUNT OF CONTRIBUTION | DATE OF ELECTION (IF APPLICABLE) |
|--------------|---|--|---------------------------|-------------------------------------|
| 06/02/2010 | Lancaster For Assembly 2010 La Verne, CA 91750 | Christopher Lancaster State Assembly District 59 Jurisdiction: State Assembly District | \$1,000.00 | 06/08/2010 |
| | ID# 1324509 Memo Reference: 1 | | | |
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Reason for Amendment:

FPPC Form 497(June/01)
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